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Bib Data Sheet

CONFIRMATION NO. 6761

SERIAL NUMBER 10/055,275	FILING DATE 01/23/2002 RULE	CLASS 714	GROUP ART UNIT 2133	ATTORNEY DOCKET NO. POU920000057US1
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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/15/2002

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 8	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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TITLE

Pseudo random optimized built-in self-test

FILING FEE	FEES: Authority has been given in Paper No. <u>1/23/02</u> to charge/credit DEPOSIT ACCOUNT No. _____ for following: <i>09-0463</i>	<input checked="" type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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